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STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY

Cardiovascular Institute of the Shoals

2095 Florence Blvd, Florence, AL 35630 Ph: (256) 766-2310 Fax: (256) 768-9956

May 1, 2017

Hon. Alva M. Lambert
Executive Director
State Health Planning and Development Agency
100 North Union Street
RSA Union Building, Suite 870
Montgomery, Alabama 36130-3025

Re: Non-Reviewability Determination Request for Cardiovascular Institute of the Shoals, P.C.

Dear Mr. Lambert:

On behalf of Cardiovascular Institute of the Shoals, P.C., I am writing to submit a reviewability determination request in accordance with the Alabama State Health Planning and Development Agency's Certificate of Need (CON) program rules and regulations. We are planning to add office-based, minimally invasive endovascular treatment of upper and lower extremity arterial and venous disease to our practice. This document will give an overview of the scope of procedures involved. We will also show how the criteria of the Physician Office Exemption, and thus non-reviewability, will be met by our office-based performance of those procedures.

We will perform fluoroscopic-based, angiographic arterial and venous interventions limited to vessels of the upper and lower extremities. This will include endovascular management of dialysis access grafts and fistulas. No cardiac or coronary interventions will be performed. All procedures will be percutaneous and catheter-based (no incisions). The intent is for all procedures to be done under local anesthesia with light conscious sedation for adjunct. No general anesthesia will be administered.

The criteria as adopted by the Supreme Court for the Physician Office Exemption are as follows:

1. The proposed services are to be provided, and related equipment used, exclusively by the physicians identified as owners or employees of the physicians' practice for the care of their patients.
2. The proposed services are to be provided, and related equipment used, at any office of such physicians.
3. All patient billings related to such services are through, or expressly on behalf of, the physicians' practice.



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4. The equipment shall not be used for inpatient care, nor by, through, or on behalf of a health-care facility

Cardiovascular Institute of the Shoals, P.C. will, through the performance of the procedures previously reviewed, meet the above criteria respectively as follows:

1. Procedures will be performed only by physician owners or physician employees of Cardiovascular Institute of the Shoals, P.C.
2. All procedures will be performed in the office of Cardiovascular Institute of the Shoals, P.C., currently located at the address as stated in the letter head of this document. All equipment necessary for the performance of the procedures will be used only in the office of Cardiovascular Institute of the Shoals, P.C.
3. All patient billing for the procedures performed will be done on behalf of, and by employees of, Cardiovascular Institute of the Shoals, P.C.
4. At no time will the equipment used for the performance of our office-based procedures be used for inpatient care, nor by, through, or on behalf of any health-care facility.

Based on the information given above, the proposed procedures in this matter should meet the criteria adopted by the Alabama Supreme Court for application of the Physician Office Exemption.

With the support of this document we respectfully request that the Alabama State Health Planning and Development Agency grant a determination of non-reviewability to Cardiovascular Institute of the Shoals, P.C. for the proposed procedures as described above. Please do not hesitate to contact us (office: 256-766-2310 or cell: 256-443-2719) if you require any further information or have any questions.

A check for the filing fee with respect to a request for a reviewability determination of \$1,000, made payable to the Alabama State Health Planning and Development Agency, is enclosed. Thank you so much for your time and consideration in this matter.

Sincerely,

Ajit K Naidu, M.D.
Owner
Cardiovascular Institute of the Shoals, P.C.



Cardiovascular Institute of the Shoals

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Name of Company Applying: Cardiovascular Institute of the Shoals, P.C.

Address: 2095 Florence Blvd., Florence, Alabama 35630

Contact Person: Ajit Naidu

Services Proposed:

We will perform fluoroscopic-based, angiographic arterial and venous interventions limited to vessels of the upper and lower extremities that are minimally invasive. This will include endovascular management of dialysis access grafts and fistulas. No cardiac or coronary interventions will be performed. All procedures will be percutaneous and catheter-based (no incisions). The intent is for all procedures to be done under local anesthesia with light conscious sedation for adjunct. No general anesthesia will be administered.

Affirmation:

The undersigned, being first duly sworn, hereby makes oath or of firms that he is the Owner of Cardiovascular Institute of the Shoals, PC, the applicant herein, and that he has knowledge of the facts set forth in the attached request for reviewability determination, and that such facts, to the best of his information, knowledge and belief, are true and correct.

Ajit K Naidu, M.D.

(NOTARY SEAL)

Subscribed and sworn to before me this the 1st day of May, 2017.

NOTARY PUBLIC

My commission expires: 06/05/2018